1991		Page 1 OMB NO.: 0938-
STATE PLAN State:	UNDER TITLE XIX OF THE SOCI	AL SECURITY ACT
GROUPS COVERED AND	AGENCIES RESPONSIBLE FOR EL	IGIBILITY DETERMINATION
Agency* Citation(s) *The Department of He	Groups Co alth and Social Services	overed
A. <u>M</u> a	e covered under this plan. andatory Coverage - Categori equired Special Groups	cally Needy and Other
	Recipients of AFDC	
	The approved State AFDC pl	an includes:
		employed parent for the eriod and an optional aths.
	$\frac{\overline{X}}{X}$ Pregnant women with	no other eligible children.
	in a secondary school	who are full-time students of or in the equivalent or technical training.
	The standards for AFDC pay Supplement 1 of ATTACHMENT	
42 CFR 435.115 2	Deemed Recipients of AFDC	
	a. Individuals denied a ti solely because the amou	itle IV-A cash payment ant would be less than \$10.
*Agency that determines	eligibility for coverage.	
	proval Date <u>0/10/93</u> E	Effective Date 1-1-93
rsedes	—	

HCFA ID: 7983E

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ision: HCFA-PM-91-4 (BPD)

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Agency* Citation(s) Groups Co
* The Department of Health and Social Services Groups Covered

- A. <u>Mandatory Coverage Categorically Needy and Other Required Special Groups</u> (Continued)
 - 2. Deemed Recipients of AFDC.

1902(a)(10)(A)(i)(I) of the Act

b. Effective October 1, 1990, participants in a work supplementation program under title IV-A and any child or relative of such individual (or other individual living in the same household as such individuals) who would be eligible for AFDC if there were no work supplementation program, in accordance with section 482(e)(6) of the Act.

402(a)(22)(A) of the Act

c. Individuals whose AFDC payments are reduced to zero by reason of recovery of overpayment of AFDC funds.

406(h) and 1902(a)(10)(A) (i)(I) of the Act d. An assistance unit deemed to be receiving AFDC for a period of four calendar months because the family becomes ineligible for AFDC as a result of collection or increased collection of support and meets the requirements of section 406(h) of the Act.

1902(a) of the Act

e. Individuals deemed to be receiving AFDC who meet the requirements of section 473(b)(1) or (2) for whom an adoption assistance agreement is in effect or foster care maintenance payments are being made under title IV-E of the Act.

TN No. Approval Date 4//0/92 Effective Date /0/1/9/ Supersedes

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^{*}Agency that determines eligibility for coverage.

Revision: HCFA-PM-91-4

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Agency* Citation(s) Groups Covered
*The Department of Health and Social Services

A. <u>Mandatory Coverage - Categorically Needy and Other Required Special Groups</u> (Continued)

407(b), 1902 (a)(10)(A)(i) and 1905(m)(1) of the Act 3. Qualified Family Members

Effective October 1, 1990, qualified family members who would be eligible to receive AFDC under section 407 of the Act because the principal wage earner is unemployed.

Qualified family members are not included because cash assistance payments may be made to families with unemployed parents for 12 months per calendar year.

1902(a)(52) and 1925 of the Act 4. Families terminated from AFDC solely because of earnings, hours of employment, or loss of earned income disregards entitled up to twelve months of extended benefits in accordance with section 1925 of the Act. (This provision expires on September 30, 1998.)

*Agency that determines eligibility for coverage.

TN No. 9/-/3 Approval Date 4/10/92 Effective Date /0/1/9/

TN No. 87-9

HCFA ID: 7983E

Revision: HCFA-PM-91-4

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ALASKA

Agency* Citation(s) Groups Covered
*The Department of Health and Social Services

- A. <u>Mandatory Coverage Categorically Needy and Other</u> <u>Required Special Groups</u> (Continued)
- 42 CFR 435.113
- 5. Individuals who are ineligible for AFDC solely because of eligibility requirements that are specifically prohibited under Medicaid. Included are:
 - a. Families denied AFDC solely because of income and resources deemed to be available from--
 - (1) Stepparents who are not legally liable for support of stepchildren under a State law of general applicability;
 - (2) Grandparents;
 - (3) Legal guardians; and
 - (4) Individual alien sponsors (who are not spouses of the individual or the individual's parent);
 - b. Families denied AFDC solely because of the involuntary inclusion of siblings who have income and resources of their own in the filing unit.
 - c. Families denied AFDC because the family transferred a resource without receiving adequate compensation.

TN No. 9/-/3 Approval Date 4/10/92 Effective Date /0/1/9/
Supersedes 7-3 HCFA ID: 7983E

^{*}Agency that determines eligibility for coverage.

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State: __ ALASKA

Agency* Citation(s) Groups Covered

* The Department of Health and Social Services

Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

42 CFR 435.114

- 6. Individuals who would be eligible for AFDC except for the increase in OASDI benefits under Pub. L. 92-336 (July 1, 1972), who were entitled to OASDI in August 1972, and who were receiving cash assistance in August 1972.
 - X Includes persons who would have been eligible for cash assistance but had not applied in August 1972 (this group was included in this State's August 1972 plan).
 - X Includes persons who would have been eligible for cash assistance in August 1972 if not in a medical institution or intermediate care facility (this group was included in this State's August 1972 plan).
 - Not applicable with respect to intermediate care facilities; State did or does not cover this service.

1902(a)(10) (A)(i)(III) and 1905(n) of the Act

- 7. Qualified Pregnant Women and Children.
 - a. A pregnant woman whose pregnancy has been medically verified who--
 - (1)Would be eligible for an AFDC cash payment if the child had been born and was living with her:

*Agency that determines eligibility for coverage.

91-13 TN No. Supersedes

Approval Date

Effective Date ___

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HCFA ID: 7983E

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	ALASKA	
	COVERAGE AND CONDITIONS OF ELIC	GIBILITY
Citation(s)	Groups	Covered

- A. Mandatory Coverage Categorically Needy and Other Required Special Groups (Continued)
 - 7. a. (2) Is a member of a family that would be eligible for aid to families with dependent children of unemployed parents if the State had an AFDC-unemployed parents program; or
 - (3) Would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan.

1902(a)(10)(A) (i)(III) and 1905(n) of the Act

- b. Children born after September 30, 1983 who are under age 19 and who would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan.
 - Children born after

 December 31, 1972

 (specify optional earlier date)

 who are under age 19 and who would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan.

TN No. 92-03Supersedes
TN No. 92-01Approval Date 4/29/92Effective Date 1/1/92

Supersedes TN No. <u>98-613</u>

Citation(s)		Group	s Cover	ed
	A.		•	overage - Categorically Needy and Other Required os (Continued)
1902(a)(10)(A) (i)(IV) and 1902(l)(l)(A) and (B) of the Act		8.	Pregnant women and infants under I year of age with family incomes up to 133 percent of the Federal poverty guideline who are described in section 1902(a)(l0)(A)(I)(IV) and 1902(l)(l)(A) and (B) of the Act The income level for this group is specified in Supplement I to ATTACHMENT 2.6-A.	
			X	The State uses a percentage greater than 133 but not more than 185 percent of the Federal poverty guideline, as established in its State plan, State legislation, or State appropriations as of December 19, 1989.
		9.	Childr	en:
1902(a)(10)(A) (i)(VI) 1902(l)(1)(C) of the Act			a.	who have attained 1 year of age but have and not attained 6 years of age, with family incomes at or below 133 percent of the Federal poverty guideline.
1902(a)(10)(A)(i) (VII) and 1902(l) (1)(D) of the Act			b.	born after September 30, 1983, who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty guideline.
				X Children born after <u>February 29, 1980</u> (specify optional earlier date) who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty guideline.
Income levels	for th	ese grouj	os are s	pecified in Supplement 1 to ATTACHMENT 2.6A.

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State:		LASK		XIX OF THE SOCIAL SECURITY ACT
	COVERAGE	AND	COND	ITIONS OF ELIGIBILITY
Citation(s)				Groups Covered
	Α.	Man	dator uired	y Coverage - Categorically Needy and Other Special Groups (Continued)
1902(a)(10) (A)(i)(V) and 1905(m) of the Act		10.	member AFDC had :	viduals other than qualified pregnant women children under item A.7. above who are ers of a family that would be receiving under section 407 of the Act if the State not exercised the option under section b)(2)(B)(i) of the Act to limit the number of hs for which a family may receive AFDC.
1902(e)(5) of the Act		11.		A woman who, while pregnant, was eligible for, applied for, and receives Medicaid under the approved State plan on the day her pregnancy ends. The woman continues to be eligible, as though she were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for a 60-day period (beginning on the last day of her pregnancy) and for any remaining days in the month in which the 60th day falls.
1902(e)(6) of the Act				A pregnant woman who would otherwise lose eligibility because of an increase in income (of the family in which she is a member) during the pregnancy or the postpartum period which extends through the end of the month in which the 60-day period (beginning on the last day of pregnancy) ends.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

st	State:	ALASKA	
		COVERAGE AND CONDITIONS OF ELIGIBILITY	
Citation(s)		Groups Covered	

A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

1902(e)(4) of the Act 12. A child born to a woman who is eligible for and receiving Medicaid as categorically needy on the date of the child's birth. The child is deemed eligible for one year from birth as long as the mother remains eligible or would remain eligible if still pregnant and the child remains in the same household as the mother.

42 CFR 435.120

- 13. Aged, Blind and Disabled Individuals Receiving Cash Assistance
 - X a. Individuals receiving SSI.

This includes beneficiaries' eligible spouses and persons receiving SSI benefits pending a final determination of blindness or disability or pending disposal of excess resources under an agreement with the Social Security Administration; and beginning January 1, 1981 persons receiving SSI under section 1619(a) of the Act or considered to be receiving SSI under section 1619(b) of the Act.

X Aged Blind Disabled

TN No. 4/29/92 Supersedes Approval Date Effective Date TN No.

Revision: HCFA-PM-91-4 (BPD) ATTACHMENT 2.2-A AUGUST 1991 Page 6a OMB NO.: 0938-ALASKA State:___ Agency* Citation(s)

*The Department of Health and Social Services Groups Covered A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued) 13. / b. Individuals who meet more restrictive 435.121 requirements for Medicaid than the SSI requirements. (This includes persons who qualify for benefits under section 1619(a) of the Act or who meet the requirements for SSI status under section 1619(b)(1) of the Act and who met the State's more 1619(b)(1) of the Act restrictive requirements for Medicaid in the month before the month they qualified for SSI under section 1619(a) or met the requirements under section 1619(b)(1) of the Act. Medicaid eligibility for these individuals continues as long as they continue to meet the 1619(a) eligibility standard or the requirements of section 1619(b) of the Act.)

Aged Blind Disabled

> The more restrictive categorical eligibility criteria are described below:

(Financial criteria are described in ATTACHMENT 2.6-A).

*Agency that determines eligibility for coverage.

TN No. Approval Date 4//0/92 Supersedes

Effective Date

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HCFA ID: 7983E

TN No.